

# ROLE ON POLITICAL LEADERSHIP IN PRESENT COVID-19 CAUSES

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**Abstract:** An infectious disease outbreak turning into a global pandemic has long been on the radar of public health experts and government agencies, who have sounded dire warnings about the likelihood and impact of such an event. The pandemic is now here. It has exposed fraught national public healthcare systems as well as the sharp divides in global politics. The war against the virus is still raging. But the country has gained great confidence from the exceptional patience of its people, the quick response of public authorities and, above all, from its trust in the leadership. While a public health crisis would, by definition, appear apolitical and a strict science/sanitary challenge, public perceptions of the coronavirus have proved very different depending on their political affiliations and the echo chamber they live in. Leadership, trust, science-based language, transparency and resistance to politicising data are all key elements of success but have been lacking in this crisis, in many geographies. The crisis will strengthen the power of the Indian State. It has shown that at a time of grave public emergency, the government is essential. Many fervent supporters of free markets have often argued for the retreat of the State and confining it to essential law and order functions, while leaving the private sector to take over other functions. This never happened in India, even though liberalisation opened up key sectors, rightly, for private sector participation. And private sector firms, including in health care, have a role in battling Covid-19.

**Keywords:** Leadership, Healthcare, Economic Emergency, Government agencies, Political Obligations, Global Scenario.

## **Introduction:**

There is a popular English proverb that says “cometh the hour, cometh the man” – the idea that the right leaders will come to the fore during times of crisis. Today, it’s indelibly linked to Winston Churchill and his leadership during World War II. For many leaders across the world, “the hour” has now come again, with the Covid-19 outbreak threatening millions

of lives across the globe unless swift, concerted action is taken. There is no easy route through the crisis. Besides the obvious problem of selecting the correct path to take, leaders also face the monumental task of reassuring the public and persuading them to follow through on government decisions – even when measures such as social distancing – with its knock-on effect on employment – come at great personal cost. A wrong move could erode trust and unleash unrest that exacerbates the existing dangers. But it remains to be seen whether our leaders will rise to the occasion with the appropriate response. Healthcare systems in many countries have very limited ability to absorb massive shocks like the one being caused by the COVID-19 outbreak. Even in rich economies such as the US and the UK, the lack of emergency healthcare facilities has forced an economic shutdown, which could have been less severe if adequate treatment facilities had been available. The cost implications of rescuing economies from collapse are immense. As we emerge from this crisis, policymakers across the world, with varying approaches to public health, will need to consider how to build and fund healthcare systems with enough capacity to deal with the next pandemic, without needing to shut down economies for long periods of time.

Yet it is often the contents of the leader's messaging that may ultimately determine the public's trust, Boin has found. "Effective crisis leadership cannot be brought about by simply doing the right thing' on the ground," he writes. Instead, the leaders need to craft a good narrative that helps clarify the problem and unite the population if they are to attain the "permissive consensus" that is essential to be able to make decisions and formulate policies, there is also the tendency to sugar-coat the situation. Although it is commonly believed that the public will panic in times of emergency, there is little empirical evidence to back this up, he argues. "The chance people will panic, due to what the government is telling them, is very low," he says.

### **Global Response of COVID-19 Causes:**

The initial global response to the coronavirus outbreak has been criticised as piecemeal and contradictory: some countries in the West saw it as 'an Asian problem'; the EU's inconsistent national policies struggled to deliver a coordinated response; Trump called it a 'hoax' aimed at discrediting his leadership, while contradicting public health experts on Twitter; and, in Brazil, President Bolsonaro defied health agencies to attend packed public rallies. Travel restrictions, in many cases, blindsided countries. For example, the US ban on visitors who had been into the Schengen area came without warning, impacting airlines on

both sides of the Atlantic. An infectious disease outbreak turning into a global pandemic has long been on the radar of public health experts and government agencies, who have sounded dire warnings about the likelihood and impact of such an event. The pandemic is now here. It has exposed fraught national public healthcare systems as well as the sharp divides in global politics. It has sparked debates, pitching globalism versus nativism and populist governments versus experts, while the policies of many global leaders have become inward looking. All of this is distracting from the concerted global response required to curb the coronavirus. Strong global initiatives are required to trace and detect cases; fund not-for-profit scientific research into vaccines and cures; and achieve a balance between travel restrictions and necessary trade. However, such initiatives have been discredited in recent years, by political agendas undermining the concept of globalisation. The growing geopolitical fragmentation since the global financial crisis – with a world increasingly multipolar and with competing ‘value-systems’ – have weakened the role of the global institutions precisely designed to coordinate a response.

The pandemic, as the World Health Organisation (who) officially declared to spreading fast, with almost More cases and deaths in 150 countries outside China. Epidemiologists reckon Italy is one or two weeks ahead of places like Spain, France, America and Britain. Less-connected countries, such as Egypt and India, are further behind, but not much.

### **Indian Context of COVID-19:**

India has shown remarkable perceptiveness and alacrity in tackling the pandemic: From conducting screenings at airports to visa restrictions, India has been scaling up its response well ahead of time. India, under the leadership of PM Modi, has moved with a meticulously planned roadmap in its fight against corona virus. There also came the most difficult decision: Shutting down all movement to stop the spread of the coronavirus. This was an extraordinary decision in many ways. From persuading people to stay at home, to planning for the economic impact of such an unprecedented lockdown — and also implementing it humanely and sensitively. The decision could not have been taken without exceptional leadership skills. In an appreciable display of democratic ethos, PM Modi directly reached out to the 1.3 billion citizens to seek their mandate. They supported the move and the lockdown has now been extended, again, with full popular support. Further, he also

spoke with all the state chief ministers who reciprocated in equal measure, highlighting the cooperative nature of Indian federalism.

The leadership role that India has assumed in dealing with this crisis is now being appreciated across the globe. India has shown the world that it cannot only handle this crisis upfront but also provide aid and support to the marginalised sections of society. The government is making all possible efforts to provide relief to the poor and the migrant workers. A relief package of Rs 1.7 lakh crore, aimed at providing a safety net along with insurance cover for frontline medical personnel, is something that is being acknowledged as a template in the collective fight against the virus. In the true spirit of VasudhaivaKutumbakam, which means “the world is one family”, India has taken the lead in helping the world at this hour of need. India, the largest producer of the drug hydroxychloroquine, has been generously helping many countries with the supplies of this potential cure of COVID-19. The war against the virus is still raging. But the country has gained great confidence from the exceptional patience of its people, the quick response of public authorities and, above all, from its trust in the leadership. As partial relaxations begin soon, I hope the people embrace more positivity. Amidst all the gloom the world over, this will also not be a small achievement.

### **Health Care of COVID-19:**

The pandemic also raises the more fundamental political question of whether healthcare should be primarily a ‘public good’ or a personal choice. For the most part, infectious diseases that pose a collective threat – such as cholera, smallpox and the plague – have disappeared from our collective memories and are, rather, frightening tales of an ancient past. Today, 71 per cent of global deaths annually (more in developed countries) are from non-communicable diseases such as heart disease and cancer; these diseases – arguably – often demand personal rather than collective healthcare choices. But all of this is fundamentally put into question when faced with a pandemic like COVID-19 which demands a collective response, and the health of the entire population – whether rich or poor – becomes interdependent. Personal risks and costs become secondary to the systemic response needed to contain the outbreak. The COVID-19

pandemic has also intensified the focus on healthcare policy outside the India, particularly as governments face increasing fiscal constraints on their ability to provide such

benefits. In several countries – including in Europe, where universal healthcare is already part of the social contract but has faced fiscal constraints – budget priorities could be reassessed in the wake of the coronavirus crisis. French President Emmanuel Macron has cited the crisis as evidence that healthcare must remain a public good and be prioritised. While a public health crisis would, by definition, appear apolitical and a strict science/sanitary challenge, public perceptions of the coronavirus have proved very different depending on their political affiliations and the echo chamber they live in. Leadership, trust, science-based language, transparency and resistance to politicising data are all key elements of success but have been lacking in this crisis, in many geographies.

### **Role on Indian Political Leadership in COVID -19 Causes:**

The coronavirus pandemic (Covid-19) has the potential of not just redefining the rules and the balance of power in the international system, but altering the contours of Indian political life. The scale of the pandemic, the national lockdown, the economic crisis it has already generated, and the fact that every citizen irrespective of class, caste, geography, gender, age, religion is affected, admittedly to varying degrees, makes Covid-19 the most significant event in recent Indian history. If society is affected, and if the economic structure is altered, it cannot but have an impact on the way political competition takes place, and on the political choices people make in the months and years ahead. While the situation remains uncertain and fluid, four key variables will determine what Indian politics will look like once the crisis subsides.

- How India manages Covid-19 will be the defining legacy of Prime Minister (PM) Narendra Modi. It is no longer Kashmir or the Ram temple or the Citizenship (Amendment) Act or welfare measures or demonetisation or Goods and Services Tax that will be the dominant element in how Modi is remembered in history. To be sure, these issues matter — and may even play a partial role in electoral outcomes and have long-term consequences. But it is whether India manages to minimise the fallout of the pandemic, with limited cases and casualties, or succumbs to it on a mass scale, with a devastating loss of lives, that will be the central element of Modi's prime ministership. It is whether India manages to, in the wake of the health crisis, reduce the economic consequences, provide social security support and rebuild its core sectors — or whether it enters a long period not just of contracted growth but perhaps even sustained recession that will define Modi's governance record. If he manages to

lead India out of this pandemic relatively successfully, Modi will have sealed not just the 2024 election — but etched his name as a heroic, almost war-time, PM. And, if he fails, nothing else he does will be able to mitigate the damage from this crisis.

- The crisis will strengthen the power of the Indian State. It has shown that at a time of grave public emergency, the government is essential. Many fervent supporters of free markets have often argued for the retreat of the State and confining it to essential law and order functions, while leaving the private sector to take over other functions. This never happened in India, even though liberalisation opened up key sectors, rightly, for private sector participation. And private sector firms, including in health care, have a role in battling Covid-19. But it is the government that is at the heart of the response. From getting Indians from abroad back home to determining the duration of a lockdown and implementing it, from deciding on the testing strategy for Covid-19 to embarking on extensive contact tracing of all those possibly infected, from allocating (what appear to be inadequate) funds to ramp up health infrastructure to announcing relief measures for the economically disadvantaged, from leveraging private sector support to representing India's point of view internationally, it is the State which is responding to the crisis. All these measures are legal and necessary, but they will enhance its power and role beyond the crisis. The era of big government is set to return.
- The crisis has the potential to redefine the nature of Indian political discourse. Growth and welfare have mattered in shaping electoral contests — but religion and caste have been key drivers in determining political choice. This is not always negative, for identity-based mobilisation, especially of marginalised caste groups, including Dalits, has given them representation. But in this process, issues of public interest have often receded. Political leaders believe that they can win elections without needing to deliver better governance outcomes if they can get the religious or caste arithmetic right. Citizens often do not demand better public service delivery — and end up making choices based on either older parochial loyalties or abstract emotional appeals. But this crisis may force both the political system and citizens to recognise that issues such as health cannot be marginal, but are central. The Aam Aadmi Party's victory in Delhi is an early indicator of this trend, where its perceived record on health and education helped it win the support of a cross-section of voters. But Covid-19 has now shown the indispensability of public health systems and the need to invest in a more healthy society and prepare better. No national election in India has been fought

on education or health or social safety; voters have not decided their choices based on which party promises to invest more funds in building State capacity. But it is hard to imagine that in the future, political parties can go to voters without an agenda on health — or that citizens will not demand better services.

- There is no easy route through the crisis. Besides the obvious problem of selecting the correct path to take, leaders also face the monumental task of reassuring the public and persuading them to follow through on government decisions – even when measures such as social distancing – with its knock-on effect on employment – come at great personal cost. A wrong move could erode trust and unleash unrest that exacerbates the existing dangers. But it remains to be seen whether our leaders will rise to the occasion with the appropriate response.

Political scientist Arjen Boin, at Leiden University in the Netherlands, has studied the most successful and unsuccessful responses during previous emergencies, and he has co-authored a book, *The Politics of Crisis Management*, that can help us to understand our leaders' messages during the current emergency. The Covid war in India has just about begun. Prime minister Narendra Modi seems to have decided the war can't be won, and has passed on the fight to chief ministers. With a national lockdown that failed to 'flatten the curve', Modi's best option now is to deflect and distract. Healthcare systems in many countries have very limited ability to absorb massive shocks like the one being caused by the COVID-19 outbreak. Even in rich economies such as the US and the UK, the lack of emergency healthcare facilities has forced an economic shutdown, which could have been less severe if adequate treatment facilities had been available. In the US, the question of universal healthcare while in many other countries – such as in Europe – where universal healthcare is already a reality, the question will turn to budget prioritisation when recent years of deficit reduction had often meant cuts in these public healthcare systems. The cost implications of rescuing economies from collapse are immense. As we emerge from this crisis, policymakers across the world, with varying approaches to public health, will need to consider how to build and fund healthcare systems with enough capacity to deal with the next pandemic, without needing to shut down economies for long periods of time. Some of the chief ministers who are being acclaimed for their handling of the coronavirus pandemic in India have in common an experience of handling crises. The best chief minister out there, Pinarayi Vijayan of Kerala, has been lucky to have learnt crisis management repeatedly in the last four years, making him battle-hardened by the time Covid-19 arrived. The Nipah virus and two massive floods taught

him how to manage a crisis situation and communicate with voters about it. Leaders with a strongman image are well-suited to deal with crises. Pinarayi Vijayan is a case in point. Another is Amarinder Singh of Punjab. He is an Army veteran. What could be a better profile to be the manager of a crisis that is being likened to a 'war'? Like a general in a war, Singh has announced 'Mission Fateh' to defeat Covid, not taking the state's low cases for granted. As Singh comes close to election year, Covid seems to have helped him arrest the anti-incumbency sentiment somewhat. Similarly, Uttar Pradesh CM Yogi Adityanath's strongman image has clearly been helped by the Covid crisis, though not as much as his supporters would like to think. Jagan Mohan Reddy of Andhra Pradesh started by taking the issue lightly in March but when he realised it was serious, led from the front, took ownership and has done a better job than many chief ministers. Andhra Pradesh, like Odisha, is even paying people to complete quarantine. At least for the moment, Reddy has put his strongman image to better use than political vendetta.

There is perhaps not a single state that is not trying to manipulate Covid-19 data to make it look as less bad as possible. But some are openly, brazenly fudging data to the extent that they look like they are trying to hide their incompetence. This is where Mamata Banerjee of West Bengal was, until she did a course correction. Helped by Cyclone Amphan in shifting attention away from Covid-19, she now talks more about Bengali pride than the coronavirus. Other data-obsessed chief ministers haven't learnt this lesson. The most shocking is K.C.R. Rao of Telangana. The state's low testing rate suggests he is living on another planet. Vijay Rupani of Gujarat is doing such a bad job that it led to speculation about his chair. Not many are saying more about it because they fear being arrested for sedition. As Covid cases and deaths rise, the chief ministers who will likely face the worst backlash are the ones deliberately not testing or are seen to be hiding and fudging data. Along with K.C.R. Rao and Vijay Rupani, both Delhi's Arvind Kejriwal and Haryana's Manohar Lal Khattar runs a very high risk of this. The least you expect of a chief minister is to lead from the front in a moment of such a big crisis. Edappadi K. Palaniswami of Tamil Nadu has let his health minister and health secretary lead the fight in public perception. As Chennai hospitals start running out of beds, Palaniswami runs the risk of public backlash, not that he was the most popular chief minister anyway. A high number of Covid cases and deaths don't necessarily have to mean a chief minister becoming unpopular. The leader must take the worst crisis head-on and be seen getting the better of it, like Winston Churchill leading Britain to victory in the war.

**Conclusion:**

People want the leader to project compassion and an understanding of how the situation is for those concerned, and to project the hope that together we can manage the crisis, even though we don't know everything about the present situation." He concedes it is a "rather difficult balancing act for our leaders," but if they can achieve it, the public will feel seen and heard. He says that's what we need right now. In his opinion, this involves appealing to collective values and a collective history, emphasising society at large rather than individual self-interest. Despite modern politics' well-known focus on press relations, Boin suspects that, in the heat of the moment, many leaders still don't appreciate just how important the messaging can be during times of crisis, particularly regarding consistency and openness. I think that leaders sometimes underestimate the effect of their own words, especially the Covid-19 causes. The entire episode will strengthen Indian federalism. The role of state governments has been critical in the battle against Covid-19. The constitutional division of powers has meant that not all decisions happen at the same time, slowing down responses in different geographies. Some states have done better than others. There have been coordination issues between the Centre and states and among states. But the crisis has brought home the indispensability of India's federal compact. A centralised, unitary structure would have struggled even more to deal with the emerging realities, given India's spread, and specific local realities. The fact that there is an administrative apparatus that percolates down to grassroots, through state governments and Panchayats, has helped and will be an asset in this long battle. Covid-19 will shape the legacies of governments and leaders; it may alter how elections are fought, what citizens demand and what political parties will need to deliver; and it will re-establish the primacy of the government in everyday lives.

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